

County: Georgetown

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GEORGETOWN ACTIVE DAY CENTER AT HIGHMARKET STREET 2902 HIGHMARKET ST GEORGETOWN, SC 29440-2918 FAC.#:843-546-2055 ARDITO, DONNA L PH#: 843-546-2055 Facility Email: DLARDITO@ACTIVEDAY.COM	Georgetown / Corporation 6 NESHAMINY INTERPLEX STE 401 FEASTERVILLE TREVOSE, PA 19053 ACTIVE SC TWO INC ADC-0208 / 07/31/2014	64
Number of Participants:		64
OASIS ADULT DAY CARE CENTER 2317 PRINCE ST GEORGETOWN, SC 29440-2925 FAC.#:843-527-4848 BROWN, TRACIE M PH#: 843-527-4848 Facility Email: OASISINC2001@YAHOO.COM	Georgetown / Corporation 2317 PRINCE ST GEORGETOWN, SC 29440-2925 OASIS II-SPECIAL POPULATIONS INC ADC-0207 / 08/31/2014	12
Number of Participants:		12

Totals For Facility/License Type: Adult Day Care
 Number of Activities/Facilities licensed: 2 Number Licensed Units: 76

County: Georgetown

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BAY MICROSURGICAL UNIT 1200 HIGHMARKET ST GEORGETOWN, SC 29440-3227 FAC.#:843-546-8421 SPRING, JANET R PH#: 843-546-8421 Facility Email: JSRING@COASTALEYEGROUP.COM	Georgetown / Corporation PO BOX 2900 GEORGETOWN, SC 29442-2900 BAY MICROSURGICAL UNIT INC ASF-0090 / 11/30/2014	1
Operating Rooms: 1 Procedure Rooms: 0 Endoscopy Rooms: 0		
GEORGETOWN ENDOSCOPY CENTER 2361 N FRASER ST GEORGETOWN, SC 29440-6410 FAC.#:843-436-1000 PH#: Facility Email: DOWENS@GEORGETOWNHOSPITALSYSTEM.ORG	Georgetown / Limited Liability 2361 N FRASER ST GEORGETOWN, SC 29440-6410 GEORGETOWN MEMORIAL HOSPITAL ASF-0106 / 08/31/2014	1
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 1		
WACCAMAW SURGERY CENTER 4630 HWY 17 BYPASS MURRELLS INLET, SC 29576 FAC.#:843-357-2200 RESETAR, GAYLE L PH#: 843-651-8211 Facility Email: GRESETAR@GEORGETOWNHOSPITALSYSTEM.ORG	Georgetown / Non-Profit Corporation 3911 HWY 17 UNIT B MURRELLS INLET, SC 29576-5014 WACCAMAW COMMUNITY HOSPITAL (INC) ASF-0085 / 08/31/2014	2
Operating Rooms: 1 Procedure Rooms: 1 Endoscopy Rooms: 0		

Totals For Facility/License Type: Ambulatory SurgeryNumber of Activities/Facilities licensed: 3 Number Licensed Units: 4

County: Georgetown

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
JESSAMINE COMMUNITY RESIDENCE 143 JESSAMINE AVE GEORGETOWN, SC 29440-5837 FAC.#:843-527-1390 RANDOLPH, STACEY PH#: 843-527-1390 Facility Email: SANTLEY@GCBDSN.COM	Georgetown / County PO BOX 1471 GEORGETOWN, SC 29442-1471 GEORGETOWN COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS CRC-1445 / 06/30/2014	8
Alzheimer Care: No Max # Resident: 0	Alzheimer Unit: No Max # Beds: 0	
Certifications: None		
LAKES AT LITCHFIELD ASSISTED LIVING 120 LAKES AT LITCHFIELD DR PAWLEYS ISLAND, SC 29585-5515 FAC.#:843-235-9393 RICHARDSON, JACQUE W PH#: 843-235-9393 Facility Email: JRICHARDSON@LAKES-LITCHFIELD.COM	Georgetown / Ltd. Liability 38 LAKES AT LITCHFIELD DR PAWLEYS ISLAND, SC 29585-5768 LITCHFIELD RETIREMENT LLC CRC-1116 / 08/31/2014	79
Alzheimer Care: Yes Max # Resident: 11	Alzheimer Unit: Yes Max # Beds: 11	
Certifications: None		
MARY'S HOME CARE 224 WARD LOOP HEMINGWAY, SC 29554-3415 FAC.#:843-558-9053 HOLMES, MARY W PH#: 843-546-1032 Facility Email: Not on File	Georgetown / Sole Proprietorship HOLMES, MARY W CRC-1505 / 05/31/2014	5
Alzheimer Care: Yes Max # Resident: 2	Alzheimer Unit: No Max # Beds: 0	
Certifications: None		
MARYVILLE COMMUNITY RESIDENCE 2602 OLD CHARLESTON RD GEORGETOWN, SC 29440-1471 FAC.#:843-546-7238 BAKER, DAVID B PH#: 843-546-8228 Facility Email: BLACKSHERANN@YAHOO.COM	Georgetown / County PO BOX 1471 GEORGETOWN, SC 29442-1471 GEORGETOWN COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS CRC-1446 / 06/30/2014	8
Alzheimer Care: No Max # Resident: 0	Alzheimer Unit: No Max # Beds: 0	
Certifications: None		
MORNINGSIDE OF GEORGETOWN 2628 N FRASER ST GEORGETOWN, SC 29440-6946 FAC.#:843-520-0319 WEAVER, ANITA N PH#: 843-520-0319 Facility Email: AWEAVER@5SQC.COM	Georgetown / Limited Liability Limited Partnership 2628 N FRASER ST GEORGETOWN, SC 29440-6946 MORNINGSIDE OF SOUTH CAROLINA LP CRC-1102 / 05/31/2014	59
Alzheimer Care: Yes Max # Resident: 30	Alzheimer Unit: No Max # Beds: 0	
Certifications: None		

County: Georgetown

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
OASIS RESIDENTIAL HOME 2317 PRINCE ST GEORGETOWN, SC 29440-2925 FAC.#:843-527-4848 HOUSER, KEISHA N PH#: 843-527-4848 Facility Email: OASISINC2001@YAHOO.COM	Georgetown / Corporation 2317 PRINCE ST GEORGETOWN, SC 29440-2925 OASIS RESIDENTIAL HOME INC CRC-1219 / 08/31/2014	22
Alzheimer Care:Yes Max # Resident:6	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
SOUTH ISLAND ASSISTED LIVING 2902 S ISLAND RD GEORGETOWN, SC 29440-4420 FAC.#:843-545-5427 GILES, MAXINE J PH#: 843-545-5427 Facility Email: SOUTHISLAND2003@GMAIL.COM	Georgetown / Corporation 2902 S ISLAND RD GEORGETOWN, SC 29440-4420 SOUTH ISLAND ASSISTED LIVING INC CRC-1272 / 02/28/2015	32
Alzheimer Care:Yes Max # Resident:3	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
SUNNY PINES BOARDING HOME 108 W GAPWAY RD ANDREWS, SC 29510-6786 FAC.#:843-221-7436 PAPILLION, GLORIA F PH#: 843-221-7436 Facility Email: SUNNYPINES57@MSN.COM	Georgetown / Sole Proprietorship PO BOX 732 ANDREWS, SC 29510-0732 MATTIE H DUROUSSEAU CRC-0098 / 05/31/2014	18
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

Totals For Facility/License Type: Community Residential Care FacilityNumber of Activities/Facilities licensed: 8 Number Licensed Units: 231

County: Georgetown

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
AMEDISYS HOME HEALTH OF GEORGETOWN 1105 CHURCH ST GEORGETOWN, SC 29440-3201 FAC.#:843-546-1730 DAWSON, KATHLEEN H PH#: 843-546-1730 Facility Email: 2205@AMEDISYS.COM Counties Served: Georgetown, Williamsburg License Restrictions: Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:	Georgetown / Limited Liability 1105 CHURCH ST GEORGETOWN, SC 29440-3201 GEORGETOWN HOSPITAL HOME HEALTH LLC HHA-0192 / 01/31/2015	2
LIVE LONG WELL CARE OF LITCHFIELD 120 LAKES AT LITCHFIELD DR PAWLEYS ISLAND, SC 29585-5515 FAC.#:843-235-2422 MIMMS, KATHRYN PH#: Facility Email: KMIMMS@LIVELONGWELLCARE.COM Counties Served: Georgetown, Special Note - SERVING CAMPUS RESIDENTS ONLY License Restrictions: SERVING CAMPUS RESIDENTS ONLY Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:	Georgetown / Ltd. Liability 476 TIMBERVIEW CT PAWLEYS ISLAND, SC 29585-5897 LITCHFIELD RETIREMENT LLC HHA-0204 / 05/31/2014	1

Totals For Facility/License Type: Home HealthNumber of Activities/Facilities licensed: 2 Number Licensed Units: 3

County: Georgetown

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
TIDELANDS COMMUNITY HOSPICE HOUSE 2591 N FRASER ST GEORGETOWN, SC 29440-6411 FAC.#:843-520-7700 PH#: Facility Email: SHANE.PLAYER@TIDELANDSHOSPICE.ORG	Georgetown / Non-Profit Corporation 2591 N FRASER ST GEORGETOWN, SC 29440-6411 TIDELANDS/GHS JOINT VENTURE LLC HPF-0008 / 01/30/2015	12

Totals For Facility/License Type: Hospice FacilityNumber of Activities/Facilities licensed: 1 Number Licensed Units: 12

County: Georgetown

Facility Type: Hospice Program

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

TIDELANDS COMMUNITY HOSPICE	Georgetown / Non-Profit Corporation	3
2591 N FRASER ST	2591 N FRASER ST	
GEORGETOWN, SC 29440-6411 FAC.#:843-546-3410	GEORGETOWN, SC 29440-6411	
PLAYER, SHANE SCOTT PH#: 843-546-3410	TIDELANDS/GHS JOINT VENTURE LLC	
Facility Email: SHANE.PLAYER@TIDELANDSHOSPICE.ORG	HPC-0009 / 02/28/2015	

Counties Served: Georgetown, Horry, Williamsburg

Totals For Facility/License Type: Hospice ProgramNumber of Activities/Facilities licensed: 1 Number Licensed Units: 3

County: Georgetown

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GEORGETOWN MEMORIAL HOSPITAL 606 BLACK RIVER RD GEORGETOWN, SC 29440-3368 FAC.#:843-527-7000 BAILEY, BRUCE P PH#: 843-527-7000 Facility Email: TKISER@GEORGETOWNHOSPITALSYSTEM.ORG	Georgetown / Non-Profit Corporation PO BOX 421718 GEORGETOWN, SC 29442-4203 GEORGETOWN MEMORIAL HOSPITAL INC HTL-0007 / 08/31/2014	131
Licensed Beds: General: 131 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 5		

Certifications: Perinatal Level II, JCAHO Accredited

WACCAMAW COMMUNITY HOSPITAL 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576-5033 FAC.#:843-652-1001 RESETAR, GAYLE L PH#: 843-651-8211 Facility Email: GRESETAR@GEORGETOWNHOSPITALSYSTEM.ORG	Georgetown / Non-Profit Corporation 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576-5033 WACCAMAW COMMUNITY HOSPITAL (INC) HTL-0834 / 10/31/2014	167
Licensed Beds: General: 124 Psychiatric: 0 Rehab: 43 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 2		

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 298

County: Georgetown

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GEORGETOWN HEALTHCARE & REHAB 2715 S ISLAND RD GEORGETOWN, SC 29440-4415 FAC.#:843-546-4123 BRYANT, COLBY E PH#: 843-553-0656 Facility Email: ADMIN@GEORGETOWNHEALTHCARE.NET	Georgetown / Limited Liability 2715 S ISLAND RD GEORGETOWN, SC 29440-4415 GEORGETOWN HC&R NURSING LLC NCF-0633 / 12/31/2014	84

Licensed Beds: Nursing Home: 84 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

LAKES AT LITCHFIELD SKILLED NURSING CENTER 80 TIMBERVIEW CT PAWLEYS ISLAND, SC 29585-5798 FAC.#:843-235-9393 RICHARDSON, JACQUE W PH#: 843-235-9393 Facility Email: HCRIBB@LAKES-LITCHFIELD.COM	Georgetown / Ltd. Liability 120 LAKES AT LITCHFIELD DR PAWLEYS ISLAND, SC 29585-5515 LITCHFIELD RETIREMENT LLC NCF-0843 / 12/31/2014	24
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Licensed Beds: Nursing Home: 17 Institutional Nursing Home: 7

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

PRINCE GEORGE HEALTHCARE CENTER 901 MAPLE ST GEORGETOWN, SC 29440-4333 FAC.#:843-546-6101 MICKENS, EVELYN PH#: Facility Email: ADMIN.PR.SC@PALMETTOLTC.COM	Georgetown / Ltd. Liability 901 MAPLE ST GEORGETOWN, SC 29440-4333 PALMETTO PRINCE GEORGE OPERATING LLC NCF-0930 / 09/30/2014	148
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Licensed Beds: Nursing Home: 148 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: Yes Max # Beds: 0

Certifications:None

Totals For Facility/License Type:Nursing HomeNumber of Activities/Facilities licensed: 3 Number Licensed Units: 256

County: Georgetown

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GEORGETOWN COUNTY ALCOHOL AND DRUG ABUSE COMMISSION 1423 WINYAH ST GEORGETOWN, SC 29440-4730 FAC.#:843-546-6081 WALKER, WILLIAM J PH#: 843-546-6081 Facility Email: WWALKER@GCADAC.ORG	Georgetown / County PO BOX 515 GEORGETOWN, SC 29442-0515 GEORGETOWN COUNTY ALCOHOL AND DRUG ABUSE COMMISSION (BOARD) OTP-0039 / 11/30/2014	1

Certifications:None

Totals For Facility/License Type: PSAD OutpatientNumber of Activities/Facilities licensed: 1 Number Licensed Units: 1

County: Georgetown

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
FMC DIALYSIS SERVICES-MURRELLS INLET 5011 HWY 17 MURRELLS INLET, SC 29576-5043 FAC.#:843-357-4840 CAMPBELL, ELIZABETH M PH#: 843-357-4840 Facility Email: CLINIC2080@FMC-NA.COM	Georgetown / Corporation 5011 HWY 17 MURRELLS INLET, SC 29576-5043 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0096 / 06/30/2014	14

Licensed Stations: Hemodialysis: 14 Peritoneal: 0

FRESENIUS MEDICAL CARE GEORGETOWN 712 N FRASER ST GEORGETOWN, SC 29440-3353 FAC.#:843-527-3431 COHENS, JACKIE PH#: Facility Email: CLINIC1390@FMC-NA.COM	Georgetown / Corporation 712 N FRASER ST GEORGETOWN, SC 29440-3353 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0009 / 09/30/2014	29
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Licensed Stations: Hemodialysis: 28 Peritoneal: 1

FRESENIUS MEDICAL CARE WINYAH 2623 S FRASER ST GEORGETOWN, SC 29440-4374 FAC.#:843-546-6900 CANNON RN, BETH PH#: Facility Email: CLINIC6730@FMC-NA.COM	Georgetown / Corporation 2623 S FRASER ST GEORGETOWN, SC 29440-4374 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0189 / 10/31/2014	15
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Licensed Stations: Hemodialysis: 15 Peritoneal: 0

Totals For Facility/License Type: Renal DialysisNumber of Activities/Facilities licensed: 3 Number Licensed Units: 58

Number of Activities/Facilities licensed in county of	<u>Georgetown</u>	# Lics: <u>26</u>
	Number Licensed Units :	<u>942</u>

Report Totals:

Total Number of Activities/Facilities licensed 26 Total Number Licensed Units: 942